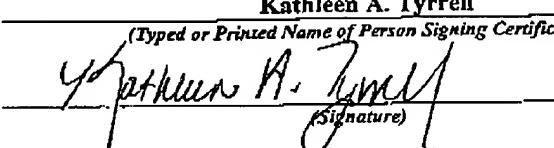
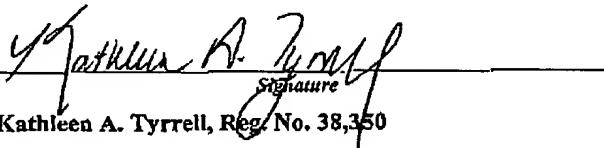


<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			Docket No. DEX-0230
Applicant(s): Chen et al.			
Serial No. 09/940,227	Filing Date August 27, 2001	Examiner Blanchard, David J.	Group Art Unit 1642
Invention: Compositions and Methods Relating to Lung Specific Genes			
<p>I hereby certify that this <u>Reply under 37 C.F.R. 1.111</u>  <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)</p> <p>on <u>December 22, 2003</u>  <small>(Date)</small></p>			
<p><u>Kathleen A. Tyrrell</u>  <small>(Typed or Printed Name of Person Signing Certificate)</small></p>  <p><small>(Signature)</small></p>			
<p><b>Note: Each paper must have its own certificate of mailing.</b></p>			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. DEX-0230	
Applicant(s): Chen et al.					
Serial No. 09/940,227	Filing Date August 27, 2001	Examiner Blanchard, David J.		Group Art Unit 1642	
Invention: Compositions and Methods Relating to Lung Specific Genes					
<b><u>TO THE COMMISSIONER FOR PATENTS:</u></b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
TOTAL CLAIMS	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	3 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>					
 Signature Kathleen A. Tyrrell, Reg. No. 38,350					
Dated: December 22, 2003					
I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.					
Signature of Person Mailing Correspondence					
Typed or Printed Name of Person Mailing Correspondence					
CC:					